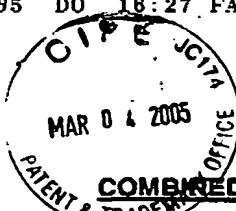


04 MAR 2005 10/517052

002



Attorney Docket No.: 966927.00048

COMBINED DECLARATION AND POWER OF ATTORNEY FOR PATENT APPLICATION

As a below named inventor, I hereby declare that: My residence, post office address and citizenship are as stated below, next to my name. I believe I am the original, first, and sole inventor (if only one name is listed below) or an original, first, and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled ALLERGEN FROM MUGWORT POLLEN the specification of which:

is attached hereto.
 was filed on June 3, 2003 as

United States Application Number , or
PCT International Application Number PCT/EP03/05780
and was amended on August 27, 2004 (if applicable).

I hereby state that I have reviewed and understand the contents of the above-identified application, including the claim(s), as amended by any amendment referred to above. I do not know and do not believe that the claimed invention was ever known or used in the United States of America before my invention thereof, or patented or described in any printed publication in any country before my invention thereof or more than one year prior to this application, that the same was not in public use or on sale in the United States of America more than one year prior to this application, and that the invention has not been patented or made the subject of an inventor's certificate issued before the date of this application in any country foreign to the United States of America on an application filed by me or my legal representatives or assigns more than twelve months (for a utility patent application) or six months (for a design patent application) prior to this application.

I acknowledge the duty to disclose all information known to me to be material to patentability as defined in Title 37, Code of Federal Regulations, Section 1.56.

I hereby claim foreign priority benefits under Title 35, United States Code, Section 119(a)-(d), of any foreign application(s) for patent or inventor's certificate listed below and have also identified below any foreign application for patent or inventor's certificate having a filing date before that of the application on which priority is claimed:

PRIOR FOREIGN/PCT APPLICATION(S) AND ANY PRIORITY CLAIMS UNDER 35 U.S.C. §119(a)-(d):			
COUNTRY (if PCT, indicate "PCT")	APPLICATION NUMBER	DATE OF FILING (day, month, year)	PRIORITY CLAIMED UNDER 35 U.S.C. §119
EP	02012302.2	04-June-2002	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
			<input type="checkbox"/> Yes <input type="checkbox"/> No
			<input type="checkbox"/> Yes <input type="checkbox"/> No
			<input type="checkbox"/> Yes <input type="checkbox"/> No
			<input type="checkbox"/> Yes <input type="checkbox"/> No

3 I hereby appoint Mark R. Shanks, Registration No. 33,781, Toni-Junell Herbert, Registration No. 34,348, Chris Aniedobe, Registration No. 48,293, and Tamara Yorita, Registration No. 53,813, of REED SMITH LLP, telephone (202) 414-9200 with the following customer number and a mailing address at:



1301 K Street, N.W.
Suite 1100 – East Tower
Washington, DC 20005

with full power of substitution and revocation, to prosecute this application and to transact all business in the Patent and Trademark Office connected herewith.

BEST AVAILABLE COPY

MAR 04 2005

The undersigned hereby authorizes the U.S. Attorneys named herein to accept and follow instructions from undersigned's assignee, if any, and/or, if the undersigned is not a resident of the United States, the undersigned's domestic attorney, patent attorney or patent agent, as to any action to be taken in the Patent and Trademark Office regarding this application without direct communication between the U.S. attorneys and the undersigned. In the event of a change in the person(s) from whom instructions may be taken, the U.S. attorneys named herein will be so notified by the undersigned.

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application of any patent issued thereon.

FULL NAME OF SOLE OR FIRST INVENTOR /	
Signature	FERREIRA, Fátima <i>Fátima Ferreira</i>
Date	28.01.2005
Residence (City, State, Country)	Salzburg, Austria <i>ATX</i>
Citizenship	Austrian
Mailing Address	Alexander Girardi Str. 35/5
City, State, ZIP, Country	A-5020 Salzburg, Austria

FULL NAME OF SECOND INVENTOR, IF ANY /	
Signature	HUBINGER, Gudrun
Date	
Residence (City, State, Country)	Weyregg am Attersee, Austria
Citizenship	Austrian
Mailing Address	Bach-58
City, State, ZIP, Country	A-4852 Weyregg am Attersee, Austria

FULL NAME OF THIRD INVENTOR, IF ANY /	
Signature	EBNER, Christof
Date	
Residence (City, State, Country)	Brunn am Gebirge, Austria
Citizenship	Austrian
Mailing Address	Heinrich-Albrechtgasse 19/1
City, State, ZIP, Country	A-2345 Brunn am Gebirge, Austria

FULL NAME OF FOURTH INVENTOR, IF ANY /	
Signature	RICHTER, Klaus <i>Klaus Richter</i>
Date	28. Jan. 05
Residence (City, State, Country)	Anif, Austria <i>ATX</i>
Citizenship	Austrian
Mailing Address	Auwaldstr. 218
City, State, ZIP, Country	A-5081 Anif, Austria

BEST AVAILABLE COPY

The undersigned hereby authorizes the U.S. Attorneys named herein to accept and follow instructions from undersigned's assignee, if any, and/or, if the undersigned is not a resident of the United States, the undersigned's domestic attorney, patent attorney or patent agent, as to any action to be taken in the Patent and Trademark Office regarding this application without direct communication between the U.S. attorneys and the undersigned. In the event of a change in the person(s) from whom instructions may be taken, the U.S. attorneys named herein will be so notified by the undersigned.

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application of any patent issued thereon.

FULL NAME OF SOLE OR FIRST INVENTOR	FERREIRA, Fátima
Signature	
Date	
Residence (City, State, Country)	Salzburg, Austria
Citizenship	Austrian
Mailing Address	Alexander Girardi Str. 35/5
City, State, ZIP, Country	A-5020 Salzburg, Austria

FULL NAME OF SECOND INVENTOR, IF ANY	HUBINGER, Gudrun
Signature	<i>Gudrun Hubinger</i>
Date	31/1/05
Residence (City, State, Country)	Weyregg am Attersee, Austria
Citizenship	Austrian
Mailing Address	Bach 58
City, State, ZIP, Country	A-4852 Weyregg am Attersee, Austria

FULL NAME OF THIRD INVENTOR, IF ANY	EBNER, Christof
Signature	
Date	
Residence (City, State, Country)	Brunn am Gebirge, Austria
Citizenship	Austrian
Mailing Address	Heinrich-Albrechtgasse 19/1
City, State, ZIP, Country	A-2345 Brunn am Gebirge, Austria

FULL NAME OF FOURTH INVENTOR, IF ANY	RICHTER, Klaus
Signature	
Date	
Residence (City, State, Country)	Anif, Austria
Citizenship	Austrian
Mailing Address	Auwaldstr. 218
City, State, ZIP, Country	A-5081 Anif, Austria

BEST AVAILABLE C

The undersigned hereby authorizes the U.S. Attorneys named herein to accept and follow instructions from undersigned's assignee, if any, and/or, if the undersigned is not a resident of the United States, the undersigned's domestic attorney, patent attorney or patent agent, as to any action to be taken in the Patent and Trademark Office regarding this application without direct communication between the U.S. attorneys and the undersigned. In the event of a change in the person(s) from whom instructions may be taken, the U.S. attorneys named herein will be so notified by the undersigned.

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application of any patent issued thereon.

FULL NAME OF SOLE OR FIRST INVENTOR	FERREIRA, Fátima
Signature	
Date	
Residence (City, State, Country)	Salzburg, Austria
Citizenship	Austrian
Mailing Address	Alexander Girardi Str. 35/5
City, State, ZIP, Country	A-5020 Salzburg, Austria

FULL NAME OF SECOND INVENTOR, IF ANY	HUBINGER, Gudrun
Signature	
Date	
Residence (City, State, Country)	Weyregg am Attersee, Austria
Citizenship	Austrian
Mailing Address	Bach 58
City, State, ZIP, Country	A-4852 Weyregg am Attersee, Austria

FULL NAME OF THIRD INVENTOR, IF ANY	EBNER, Christof
Signature	<i>Christof Ebner</i>
Date	27.1.05
Residence (City, State, Country)	Brunn am Gebirge, Austria <i>ATX</i>
Citizenship	Austrian
Mailing Address	Heinrich-Albrechtgasse 19/1
City, State, ZIP, Country	A-2345 Brunn am Gebirge, Austria

FULL NAME OF FOURTH INVENTOR, IF ANY	RICHTER, Klaus
Signature	
Date	
Residence (City, State, Country)	Anif, Austria
Citizenship	Austrian
Mailing Address	Auwaldstr. 218
City, State, ZIP, Country	A-5081 Anif, Austria